



General Assembly

January Session, 2007

Committee Bill No. 6646

LCO No. 5909

05909HB06646HS_

Referred to Committee on Human Services

Introduced by:
(HS)

**AN ACT CONCERNING MEDICAID BILLING PRACTICES FOR
FEDERALLY QUALIFIED HEALTH CENTERS.**

Be it enacted by the Senate and House of Representatives in General
Assembly convened:

1 Section 1. Section 17b-245b of the general statutes is repealed and
2 the following is substituted in lieu thereof (*Effective July 1, 2007*):

3 The Commissioner of Social Services shall, consistent with federal
4 law, make changes to the cost-based reimbursement methodology in
5 the Medicaid program for federally qualified health centers. To the
6 extent permitted by federal law, the commissioner may reimburse a
7 federally qualified health center under the Medicaid program for
8 multiple medical services provided to an individual during the course
9 of a calendar day, irrespective of the type of service provided. On or
10 before [March 1, 2004] January 1, 2008, the commissioner shall report
11 to the joint standing committees of the General Assembly having
12 cognizance of matters relating to appropriations and the budgets of
13 state agencies and human services on the status of the changes to the
14 cost-based reimbursement methodology.

This act shall take effect as follows and shall amend the following sections:		
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Section 1	July 1, 2007	17b-245b
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Statement of Purpose:

To permit federally qualified health centers to receive reimbursement under the Medicaid program for multiple medical services provided to an individual on the same calendar day.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]

Co-Sponsors: REP. OLSON, 46th Dist.; REP. MALONE, 47th Dist.
 REP. REYNOLDS, 42nd Dist.; REP. RITTER, 38th Dist.
 REP. RYAN, 139th Dist.; SEN. PRAGUE, 19th Dist.

H.B. 6646